



Office of Charitable Gaming
P.O. Box 98502, Baton Rouge, LA 70884
(225) 925-1835 or (800) 562-9235 FAX (225) 925-7069

Original Application ☐

Renewal ☐

Previous Lic./Exempt Number

Please Print

Application for License Exemption to Conduct Charitable Gaming

Official Name of Organization		Federal Tax ID Number		Organization Phone Number	
Physical Address / Location (Street, City, State, Zip Code)		Official Mailing Address of Organization			Parish
Name of Building Where Game(s) Conducted		Owner of Building			Rent to be Paid
Physical Address of Building Where Game(s) Conducted		City	Zip Code	Parish	
Contact Person for Organization		Title / Position Held			
Mailing Address of Contact Person		Office Phone Number		Home Phone Number	
		Fax Number			
Games Requested: Bingo _____ Raffle _____ Other _____ (explain on next page)					

REQUIRED INFORMATION:

- _____ Initial here if organization has a 501-C status from IRS. Attach copy unless organization has a previous exemption.
_____ Initial here if organization does **NOT** have a 501-C status.
- If organization is school related (PTA, Booster Club, etc.), provide letter of permission from principal or other authorized school board agent.
- What will gaming proceeds be used for? _____

4.

Month	Day	Year	Time	Month	Day	Year	Time
			a.m.				a.m.
			p.m.				p.m.
			a.m.				a.m.
			p.m.				p.m.
			a.m.				a.m.
			p.m.				p.m.

A minimum of 15 days notice is required before any of the above games are allowed.

Do not write below this line. For office use only.

Exempt? YES _____ NO _____		IRS Code: _____ Law / Rule Section: _____ Exempt License #: E - _____
Authorizing Signature _____ Date _____		

5. For Raffles: _____ Price per ticket. _____ Total number of tickets available for sale.

List of Prizes (Description/ Value):

1 st _____	6 th _____
2 nd _____	7 th _____
3 rd _____	8 th _____
4 th _____	9 th _____
5 th _____	10 th _____

\$ _____ Total value of prizes to be given away.
(Include date and time of **drawing only** in gaming schedule.)

6. **YES** **NO**

_____ Is organization comprised exclusively of school-age children enrolled in public or private schools?
_____ Will any other charitable gaming be held at the same time and place as those listed on this application?

If 'YES', please explain. _____

7. For Bingo: _____ Is organization a '**Bona fide Senior Citizens Recreation Club**' sanctioned by local Council on Aging?

_____ Are prizes donated?
If 'YES', what is the total fair market value of donated prizes? \$ _____

_____ Will total gross receipts from all gaming activities exceed \$5000 for the calendar year?

Comments / Explanations

I hereby certify, that, under penalty of law, all information above is true and correct to the best of my knowledge.

Signature

Date

Print Name

Title